

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION of OIL, GAS and MINING  
1594 West North Temple, Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801  
(801) 538-5291

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APPLICATION FOR TRANSFER  
OF  
NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

Application is hereby made to transfer the permit to commence small mining operations for the  
BOTTLENECK PIT project, permit # S/ 003 / 0084, currently  
operated by YOUNG RESOURCES LTD PARTNERSHIP (transferor)  
to NORTSHORE ROCK PRODUCTS LLC (transferee).

As used herein, TRANSFEROR refers to the current operator; TRANSFEE refers to the  
proposed new operator; NOI refers to the Notice of Intention to Commence Small Mining  
Operations; PERMIT refers to the approved (or accepted) NOI, including the reclamation  
contract and reclamation surety.

Upon approval of the Application for Transfer:

1. The Transferor agrees to transfer all rights and obligations to operate under the terms of the NOI to the Transferee, The Transferor will not retain any rights to conduct small mining operations within the area covered by the approved NOI.
2. Both parties understand the transfer of the ***NOI is not complete until all the applicable requirements are met***, including the submittal and Division approval of an appropriate reclamation surety and a reclamation contract.
3. The transferee has read and has a copy of the current NOI.
4. The Transferee has inspected the site and is fully aware of all existing conditions and responsible for compliance with the conditions of the permit and the obligations regardless of the nature of the conditions at the site.
5. Transferee shall conduct large mining operations on lands included in the NOI in accordance with the Utah Mined Land Reclamation Act, (ACT) Sections 40-8-1 et seq., Utah Code Annotated, (2005, as amended), and the rules promulgated under the ACT (R647- et seq., and the approved NOI.
6. The Transferee shall provide a surety in a form and amount approved by the Division to assure reclamation of the lands affected by the mining operations.

The **Transferor** will remain liable for compliance at the mine site until this transfer application is approved.

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Div. of Oil, Gas & Mining

S/003/0084  
Task ID# 5827  
cc: Lynn  
Paul



The signatory below represents that he/she has authority to execute this transfer on behalf of the Transferor, if not a natural person. Statements made in the application are true and correct to the best of my knowledge and belief.

TRANSFEROR:

YOUNG RESOURCES LTD PARTNERSHIP

Operator/Transferor Name

By JOHN H. YOUNG

Name of Authorized Officer (Typed or Printed)

PARTNER

Title of Authorized Officer

Officer's Signature

Date

Jan 14, 2014

STATE OF UTAH )

COUNTY OF WEBER ) ss:

On the 14 day of JANUARY, 20 14, JOHN H. YOUNG  
personally appeared before me, who being by me duly sworn did say that he/she is  
an PARTNER (owner, officer, director, partner, agent or other (specify))  
of the Operator YOUNG RESOURCES LTD PARTNERSHIP  
and duly acknowledged that said instrument was signed on behalf of said Operator  
by authority of its bylaws, a resolution of its board of directors, or as may otherwise  
be required to execute the same with full authority and to be bound hereby.

Notary Public

MORRIS, UT

Residing at

09/27/2017

My Commission Expires:





The signatory below represents that he/she has authority to execute this transfer on behalf of the Operator/Transferee, if not a natural person; and the operator/transferee is a properly organized entity in good standing under the laws of Utah and the United States, is registered as an entity authorized to do business in the State of Utah. Statements made in the application are true and correct to the best of my knowledge and belief.

TRANSFEE:

NORTHSHORE ROCK PRODUCTS LLC

Operator/Transferee Name

By BRENT M. KENLEY

Name of Authorized Officer (Typed or Printed)

MANAGER

Title of Authorized Officer

Officer's Signature

Date

STATE OF Utah )  
 ) ss:  
COUNTY OF Weber )

On the 17 day of January, 2014, BRENT M. KENLEY  
personally appeared before me, who being by me duly sworn did say that he/she is  
an MANAGER (owner, officer, director, partner, agent or other (specify))  
of the Operator NORTHSHORE ROCK PRODUCTS LLC  
and duly acknowledged that said instrument was signed on behalf of said Operator  
by authority of its bylaws, a resolution of its board of directors, or as may otherwise  
be required to execute the same with full authority and to be bound hereby.

Jill H. Nelson  
Notary Public

Mantua, Utah  
Residing at

11-29-2014  
My Commission Expires:





Task: 5827

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Telephone: (801) 538-5291 Fax: (801) 359-3940

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NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

The information requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1987, and the General Rules as promulgated under the Utah Minerals Regulatory Program (R647). The rules and Act are available online at <http://www.rules.utah.gov/publicat/code/r647/r647.htm> and [http://le.utah.gov/~code/TITLE40/40\\_08.htm](http://le.utah.gov/~code/TITLE40/40_08.htm).

"Small Mining Operations" are operations which have a disturbed area of ten or fewer surface acres at any time in unincorporated areas, or five acres or fewer in incorporated areas.

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I. **GENERAL INFORMATION** (Rule R647-3-104)

1. **Name of Mine:** BOTTLENECK PIT

2.A. **Name of Entity Applying for a Permit:** NOTSHORE ROCK PRODUCTS LLC

Contact (Authorized Officer): BRENT M. KENLEY

Mailing Address: 1740 COMBE RD, STE 1

City, State, Zip: SOUTH OGDEN, UT 84403

Phone: 801-668-0375

Fax: \_\_\_\_\_

E-mail Address: bkenley@northshorerockproducts.com

Entity is a: ☐ Corporation ☒ LLC ☐ Sole Proprietorship (dba) ☐ Individual  
☐ Partnership (☐ General or ☐ limited) ☐ Other (specify type) \_\_\_\_\_

**Business Entity (not individuals) must be registered (and maintain registration) with the State of Utah, Division of Corporations (DOC)** If not currently registered, contact [www.commerce.utah.gov](http://www.commerce.utah.gov) to renew or apply.

2.B. Are you currently registered to do business in the State of Utah? ☒ Yes ☐ No

Business Entity #: 8362827-0160

Local Business License #: ~~2014~~ 2014-71 (if required)

Issued by: County: \_\_\_\_\_ or City: HONEYVILLE CITY

Registered Utah Agent (as identified with the Utah DOC) (if individual leave blank):

Name: KENDALL PRESNELL

Title: R.A.

Address: 1740 COMBE RD, STE 1

City, State, Zip: SOUTH OGDEN, UT 84403

Phone: 801-391-2232

Fax: \_\_\_\_\_

E-mail Address: kendall@northshorerockproducts.com



**2.C. Entity's Representative(s) (if different from #2A) authorized and designated to receive notices of violation, cessation orders, and all other notices to be given to the permittee or operator by the Division.**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Emergency, Weekend, or Holiday Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

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Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Emergency, Weekend, or Holiday Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Div. of Envtl. Gas & Mining

**3a. If Business is a Sole Proprietor (dba) or Individual:**

Name of Owner: \_\_\_\_\_ Title: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**3b. If Business is a Corporation:**

Name of Officers: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Headquarters Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**3c. If Business is a Limited Liability Company:**



Member Managed



Manager Managed

Name of 1<sup>st</sup> Member/Manager: BRENT M. KENLEY Title: MANAGER  
Business Address: 1740 COMBE RD, STE 1  
City, State, Zip: SOUTH OGDEN, UT 84403  
Phone: 801-668-0375 Fax: \_\_\_\_\_  
E-mail Address: bkenley@northshorerockproducts.com

Name of 2<sup>nd</sup> Member/Manager: KENDALL PRESNELL Title: MANAGER  
Business Address: 1740 COMBE RD, STE 1  
City, State, Zip: SOUTH OGDEN, UT 84403  
Phone: 801-391-2232 Fax: \_\_\_\_\_  
E-mail Address: kendall@northshorerockproducts.com

**3d. If Business is a Partnership:**

Names of First Partner: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Names of Second Partner: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_



VII. SIGNATURE REQUIREMENT

**CERTIFICATION**

I state under penalty of perjury under the laws of the state of Utah and the United States of America that:

- a. I have read this form and declare the information, statements and/or documentation are true, correct and complete to the best of my knowledge and belief; AND
- b. I commit to the reclamation of the aforementioned small mining project as required by the Utah Mined Land Reclamation Act (40-8) and the rules as specified by the Board of Oil, Gas and Mining.
- c. **This certification must be signed by:** (1.) an executive officer if the applicant is a corporation; (2.) a partner if applicant is a partnership (general or limited); (3.) the owner if applicant is a sole proprietorship; **or** (4.) the member or manager if applicant is a limited liability company.

Signature: Brent M Kenley Date: 1/17/14  
Name (typed or printed): BRENT M. KENLEY  
Title/Position (if applicable): MANAGER

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